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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*

## \*\* FOREIGN APPLICATIONS \*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no Met after Allowance	STATE OR COUNTRY MI	SHEETS DRAWING 9	TOTAL CLAIMS 58	INDEPENDENT CLAIMS 4
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>					

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## TITLE

Handheld multi-tool

FILING FEE RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other
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